

PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

05/14/2004 SLUANG1 00000006 192814 10709473

01 FC:2001 385.00 DA

PTO-1556
(5/87)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10709473

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|--------------|--------------|
| TOTAL CLAIMS | 6 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 6 minus 20= | * 0 |
| INDEPENDENT CLAIMS | 6 minus 3= | * 0 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus | ** |
| Independent | * | Minus | *** |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus | ** |
| Independent | * | Minus | *** |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus | ** |
| Independent | * | Minus | *** |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 385.00 |
| XS 9= | |
| X43= | |
| +145= | |
| TOTAL | 385 |

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 770.00 |
| XS18= | |
| X86= | |
| +290= | |
| TOTAL | |

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| XS 9= | |
| X43= | |
| +145= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| XS18= | |
| X86= | |
| +290= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| XS 9= | |
| X43= | |
| +145= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| XS18= | |
| X86= | |
| +290= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| XS 9= | |
| X43= | |
| +145= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| XS18= | |
| X86= | |
| +290= | |
| TOTAL ADDIT. FEE | |

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

| Title of Invention | IMPROVED CRUTCH APPARATUS AND METHOD | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------------------------------------|-----------------|-------------|-------------|-------------|--------------------|------|-----|-----|--------------------------------------|--|--|--|-----------------|--------------|----------|-----------|-------------|-----------------|---|------|---|---|-----------------------|---|------|----|---|--------------------------------------|--|--|--|--|
| Application Number: Date: First Named Applicant: Peter Van Der Sluis Attorney Docket Number: 43887.0100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL FEE AUTHORIZED \$385 Patent fees are subject to annual revisions on or about October 1st of each year. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Filing as small entity BASIC FILING FEE <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>385</td><td>385</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fee: \$385</td></tr></tbody></table> EXTRA CLAIM FEES <table border="1"><thead><tr><th>Fee Description</th><th>Extra Claims</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims: 6</td><td>0</td><td>2202</td><td>9</td><td>0</td></tr><tr><td>Independent Claims: 1</td><td>0</td><td>2201</td><td>43</td><td>0</td></tr><tr><td colspan="5">Subtotal For Extra Claims Fees: \$ 0</td></tr></tbody></table> | | Fee Description | Fee Code | Amount \$ | Fee Paid \$ | Utility Filing Fee | 2001 | 385 | 385 | Subtotal For Basic Filing Fee: \$385 | | | | Fee Description | Extra Claims | Fee Code | Amount \$ | Fee Paid \$ | Total Claims: 6 | 0 | 2202 | 9 | 0 | Independent Claims: 1 | 0 | 2201 | 43 | 0 | Subtotal For Extra Claims Fees: \$ 0 | | | | |
| Fee Description | Fee Code | Amount \$ | Fee Paid \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Utility Filing Fee | 2001 | 385 | 385 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subtotal For Basic Filing Fee: \$385 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Description | Extra Claims | Fee Code | Amount \$ | Fee Paid \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims: 6 | 0 | 2202 | 9 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims: 1 | 0 | 2201 | 43 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subtotal For Extra Claims Fees: \$ 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AUTHORIZED BILLING INFORMATION The commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit account number: 192816 Access Code ***** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Deposit name: Snell and Wilmer, LLP

Deposit authorized name: Howard I. Sobelman

Signature: /HIS

Date (YYYYMMDD): 2004-05-07

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.